

## The Commonwealth of Massachusetts Alcoholic Beverages Control Commission 239 Causeway Street Boston, MA 02114

www.mass.gov/abcc

### ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 003600001		CITY OR TOWN	ASHBY	
APPLICATION FOR RENEWAL:	Annual	LICEN	SED FOR 2013	
	CLASS		YEAR	
LICENSEE NAME: HOLMES-CURRA DOING BUSINESS A	N BENNETT POST	#361 THE A.L.ING	C.	
ADDRESS NEW IPSWICH RD.	CTLATED A CA		01.401	
CITY/TOWN: ASHBY	STATE: MA	ZIP CODE:	01431	
MANAGER: BIGWOOD,MICHA TYP EL	E OF LICENSE: Clu	b C.	ATEGORY: All Alcohol	
EMAIL ADDRESS:				
PLEASE ALSO VISIT OUR WEDESCRIPTION OF LICENSED PREMIS	SES:			
FRONT SIDE DOOR DANCE HALL AN STOCKROOMS, FURNACE ROOM AND MEETING HALL AND KITCHEN, BATT	D COOLER ROOM.	WHITE BUILDIN	G;FRONT DOOR,	
I hereby certify and swear under penalties	of perjury that:			
1. the renewed license will be of t	• •	•		
<ul><li>2. the licensee has complied with</li><li>3. the premises are now open for</li></ul>		_	o taxes; and	
SIGNED BY Individual, Partner	or Authorized Corpo	rate Officer		
DATE: TELEPHONI	E NUMBER:		EMPLOYER IDENTIFICATION NUMBER:	
		(Note: NOT Individual Social Security Number)		
We the undersigned, attest that we are Acts of 2004, signed by the building ins named license and (2) the certificate of of 2010.	pector and the head	of the fire depart	ment for the above	
Please Check Below:		LOCAL LICENS	SING AUTHORITY	
APPROVED:		By:		
DISAPPROVED: (If disapproved explain)				
(II disapproved explain)				
DATE:				



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### OFF-PREMISESLICENSE RENEWAL APPLICATION

LICENSE NU	MBER: 003600004		CITY OR TOWN ASHDT		
APPLICATION FOR RENEWAL:		: Annual	LICENSED FOR 2013		
		CLASS		YEAR	
DOING BUSI	AME: ASHBY MA NESS A AIN AND SOUTH I				
CITY/TOWN:	ASHBY	STATE: MA	ZIP CODE: 01431		
MANAGER:	ARNOLD, WILLIAM L.	TYPE OF LICENSE: P	Cackage Store CATEGORY:	Wine and Malt Regular	
EMAIL ADDI	RESS:				
	PLEASE ALSO VISI	T OUR WEBSITE AND ENTER YOUR	EMAIL ADDRESS	_	
	N OF LICENSED P SENERAL STORE	REMISES:			
2. the	licensee has complied premises are now op	• •			
DATE:	TELE	PHONE NUMBER:	EMPLOYER IDENTIFICA (Note: <u>NOT</u> Individual Social		
Please Check Beld APPROVED: DISAPPROVE (If disapproved	ED:		LOCAL LICENSING AUTH By:	IORITY	
DATE:			_		

APPLICATION FOR RENEWAL MUST BE FILED BY LICENSEES DURING THE MONTH OF NOVEMBER (M.G.L. Ch. 138 \$ 16A)



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# OFF-PREMISESLICENSE RENEWAL APPLICATION

LICENSE NU	MBER: 003600005	CITY OR TOWN ASHD I		
APPLICATION FOR RENEW		Annual LICENSED F		R 2013
		CLASS		YEAR
	AME: E.C. 31, INC NESS A 31 STORE			
ADDRESS 70	4-1 FITCHBURG ST	ΓATE RD.		
CITY/TOWN:	ASHBY	STATE: MA	ZIP CODE: 01431	
MANAGER:	FREDRICKSON, PAUL	TYPE OF LICENSE:Pa	ackage Store CATEGOR	Y: All Alcohol
EMAIL ADDI	RESS:			
	PLEASE ALSO VISIT	OUR WEBSITE AND ENTER YOUR	EMAIL ADDRESS	
DESCRIPTIO	N OF LICENSED PI	REMISES:		
ONE FLOOR	OF TWO ROOMS; I	BASEMENT FOR STORA	AGE	
	premises are now op	en for business (If not experiment or Authorized Corp		nd
DATE:	TELEI	PHONE NUMBER:	EMPLOYER IDENTIFIC (Note: <u>NOT</u> Individual Soci	
Please Check Beld APPROVED: DISAPPROVI (If disapproved	ED:		LOCAL LICENSING AUT	ΓHORITY
DATE:				

APPLICATION FOR RENEWAL MUST BE FILED BY LICENSEES DURING THE MONTH OF NOVEMBER (M.G.L. Ch. 138 \$ 16A)